Fill in this inforr	nation to identify your case:	
Debtor 1	David Colpe	
Debtor 2 (Spouse, if filing)		
United States E	Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	
Case number	23-11654	Check if this is:
(If known)		An amended filing
Official F	orm 106l	A supplement showing postpetition chapter 13 income as of the following date:

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debto	or 1	Debtor 2 or non-filing spouse		
If you have more than one job,	Employment status	Em	ployed	■ Employed		
attach a separate page with information about additional	Employment status	□ No	t employed	☐ Not employed		
employers.	Occupation			PT - price spy		
Include part-time, seasonal, or self-employed work.	yed work. Employer's name Inc. n may include student aker, if it applies. Employer's address 400		delphia Youth Network,	Retail Data		
Occupation may include student or homemaker, if it applies.			flarket Street, Suite 200 delphia, PA 19106			
	How long employed th	ere?	7 months			

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

		For Debtor 1	For Debtor 2 or non-filing spouse					
2.	\$	6,461.39	\$	457.91				
3.	+\$	0.00	+\$	0.00				
4.	\$	6,461.39	\$	457.91				

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Deb	otor 1	David Colpe		(Çase ı	number (<i>if known</i>)		23-11654		
					For	Debtor 1		For Debto		
	Cop	by line 4 here	4.		\$	6,461.39		\$	457.91	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	1	\$	1,182.98		\$	66.56	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	-	\$	0.00	
	5c.	Voluntary contributions for retirement plans	50		\$	0.00		\$	13.72	
	5d.	Required repayments of retirement fund loans	50		\$	0.00		\$	0.00	_
	5e.	Insurance	5e) .	\$	820.32		\$	0.00	
	5f.	Domestic support obligations	5f.		\$	0.00		\$	0.00	
	5g.	Union dues	5g	J.	\$	0.00		\$	0.00	
	5h.	Other deductions. Specify:	5h	1.+	\$	0.00	+	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,003.30		\$	80.28	1
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,458.09		\$	377.63	3
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$	0.00		\$	0.00	<u>L</u>
	8b.	Interest and dividends	8b	١.	\$	0.00		\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c		\$	0.00		\$	0.00	
	8d.	Unemployment compensation	8d		\$	0.00		\$	0.00	
	8e. 8f.	Social Security	8e		\$	0.00		\$	0.00	
	О1.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00		\$	0.00	
	8g.	Pension or retirement income	8g		\$	1,100.00		\$	0.00	
	8h.	Other monthly income. Specify: Pro-rated Tax Refund	8h		\$	66.00	+	\$	0.00	
9.	Δdd	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9				\$		
0.	7144	an estal meetic. And miles but option out of the signal.	٠.			1,166.00		Ψ	0.0	U
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	5	,624.09 + \$		377.63	= \$	6,001.72
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your rifiends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe					in Schedul	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$	6,001.72
13.	Do y	ro⊔ expect an increase or decrease within the year after you file this form No.	?						Combin monthl	ned y income
		Yes. Explain:					_			